# **Application Data Sheet**

Application Information	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form	
(CRF)?::	
Number of copies of CRF::	
Title::	SOYBEAN VARIETY XB09J04
Attorney Docket Number::	1795
Attorney Docket Number:: Request for Early Publication?::	1795 Yes
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Request for Early Publication?::	Yes
Request for Early Publication?:: Request for Non-Publication?::	Yes
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure::	Yes
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets::	Yes
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity::	Yes
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity:: Petition included?::	Yes
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity:: Petition included?::	Yes

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Martin

Middle Name:: Arthur

Family Name:: Fabrizius

1

Initial 1/30/2004

City of Residence::

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State or Province of Residence::

MN

Country of Residence::

US

Street of mailing address::

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City of mailing address::

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State or Province of mailing address::

MN

Postal or Zip Code of mailing address:: 56283

#### **Applicant Information:**

Applicant Authority type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Michael

Middle Name::

**Thomas** 

Family Name::

Roach

City of Residence::

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State or Province of Residence::

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## **Correspondence Information**

Correspondence Customer Number::

27310

### **Representative Information**

Representative Customer Number::

27310

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

# **Assignee Information**

Assignee Name::

Pioneer Hi-Bred International, Inc.